## BEST AVAILABLE COPY

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

1000 4152

TOTAL CLAIMS	CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
NUMBER FILED   NUMBER EXTRA	TOTAL CLAIMS			29				RAT	Ε	FEE	1	RATE	FEE
MULTIPLE DEPENDENT CLAIMS   5   minus 3   2	FOR					NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00
MULTIPLE DEPENDENT CLAIMS   5   minus 3   2   X40   OR   X80   1/6 O	TOTAL CHARGEABLE CLAIMS			29 minus 20=		. 9		X\$ 9	)=		OR	X\$18=	162
Highest Presentation of Multiple Dependent   Minus   Highest Previously Pald Previously Pald Previously Pald Previously Pald Previously Pald   Minus   Highest Previously Pald Previously Pa	INDEPENDENT CLAIMS			5 minus 3 =		2		X40	=		OR	X80=	
CLAIMS AS AMENDED - PART II	MU	ILTIPLE DEPEN	IDENT CLAIM P	RESENT				+135	 5=		OR	+270=	-
Column 1   Column 2   Column 3   FIGHEST   PRESENT   PRESENT   EXTRA   ADDIT. FEE   Column 3   FIGHEST   PRESENT	* If	the difference	in column 1 is	less than zero, enter "0" in			olumn 2	TOTA	۹L		OR	TOTAL	1032
Column 2   Column 3   RATE   ADDI- RATE   TIONAL FEE	CLAIMS AS AMENDED - PART II										•		
RATE   FRATE   FRATE							(Column 3)	1			OH	SMALL	
HIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	NDMENT A		REMAINING AFTER		NUM PREVI	BER OUSLY		RAT	E	TIONAL		RATE	TIONAL
HIST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			*		**		=	X\$ 9	=		OR	X\$18=	
135	AME		NTATION OF MI			CLAIM	=	X40	=		OR	X80=	h A
COlumn 1)   COlumn 2)   COlumn 3)   RADDIT.FEE   OR ADDIT.FEE		THIST THESENTATION OF WIDELIFFE DEPENDENT CEANWI							=		OR	+270=	
Column 1)   Column 2)   Column 3)   CLAIMS   HIGHEST   NUMBER   PREVIOUSLY   EXTRA   FEE   PREVIOUSLY   FE											OR		
Total			(Column 1)		(Colu	mn 2)	(Column 3)	AUDIT. P			,	ADDI1.1 C.	
Total			CLAIMS		HIGH	EST				ADDI-			ADDI-
Hast Presentation of Mountiffe Dependent Claim   Hast Presentation of Mountiffe Dependent Claim   Hast Present   Hast Presen	AMENDMENT E		AFTER		PREVI	DUSLY		RAT	Ε	TIONAL		RATE	TIONAL
Hast presentation of Moltifle Dependent Claim   Hast present the dependent   Hast present the first present that the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number		Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
Hast presentation of Moltifle Dependent Claim   Hast present the dependent   Hast present the first present that the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."   If the "Highest Number			*		<u> </u>	CL AINA	=	X40	=		OR	X80=	
(Column 1) (Column 2) (Column 3)  CLAIMS REMAINING AFTER AMENDMENT  Total  Total  Minus  ***  FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM  **If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  **ADDIT. FEE  ADDIT. FEE  ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE  ADDIT. FEE  OR ADDIT. FEE  OR ADDIT. FEE  ADDIT. FEE  OR ADDIT. FEE	_	FIRST PRESE	NIATION OF MI	JUIPLE DEF	ZENDEN	CLAIM		+135	=		OR	+270=	
CLAIMS REMAINING AFTER AFTER AMENDMENT  Total  Independent  If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  PRESENT EXTRA  PRESENT EXTRA  PRESENT EXTRA  PRESENT TIONAL FEE  X\$ 9=  OR  X\$18=  OR  ADDI- TIONAL FEE  OR  TOTAL ADDIT. FEE  OR  TOTAL ADDIT. FEE  OR  TOTAL ADDIT. FEE											OR		
REMAINING AFTER AMENDMENT PREVIOUSLY PAID FOR PRESENT EXTRA  Total * Minus *** =			(Column 1)		(Colu	mn 2)	(Column 3)						
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	MENDMENT C		REMAINING AFTER		NUM PREVI	BER OUSLY		RAT	E	TIONAL		RATE	TIONAL
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."		Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
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* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."	L	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		X40			ОН	7.00-	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."		If the entry in colu	mn 1 is less than t	he entry in col-	ımn 2 weit	a "O" in co	dumo 3				OR		
	**	If the "Highest Nu If the "Highest Nu	mber Previously P Imber Previously P	aid For" IN THI aid For" IN TH	S SPACE IS SPACE	is less tha is less tha	in 20, enter "20." an 3, enter "3."	ADDIT. F	EE			ADDIT. FEE	